ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE	
FEE DETERMINATION	Alg.		· 6/6/10	
O.I.P.E. CLASSIFIER	7	4_	6/12/00	
FORMALITY REVIEW				
RESPONSE FORMALITY REVIEW			1 /1	
		71471	8/4	

INDEX OF CLAIMS

~	Rejected	N	Non-elected
=	Allowed	i	Interference
_	(Through numeral) Canceled	Α	Appeal
÷	Restricted	0	Objected

÷ Hestricted U Ubjected									
Claim Date	Claim	Date	Claim	Date					
Final Original 4/18/03	Final		Final						
2/1/1	51 52		101	 					
	53	 	103	 					
	54	 	104	 					
4 5	55	 	105						
16	56	1-1-1-1-1-1	106	+					
	57	- - - - 	107						
8 + + + + + + + + + + + + + + + + + + +	58		108	 					
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1111	61	 	111	 					
12	62	+++++	112	++++					
13/1/1	63		113	 					
14	64	 	114	+ + + + + + + + + + + + + + + + + + + +					
	65	++++	115	 					
16 7 7	66		116						
17	67		117	 					
18	68	- 	118	 					
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	71		121						
	72	 	122	- - - - - - - - - - - - 					
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	75	 	125	 					
25 26	76		126						
27	77		127	 					
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30	80		130	 					
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	82		132	 					
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34	84		134	++++					
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36	86	++++ +	136						
37	87		137	 					
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39	89		139	 					
40	90	 	140	 					
			141						
41	91								
42	92		142	++++					
43	93			 					
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45	95		145	 					
46	96		146	 					
47	97		147	 					
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50	100		150						

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non liscl

here 3. Pa

If more than 150 claims or 10 actions staple additional sheet here

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